

Must be presented to a Transport Service Delivery Agent  
*Heavy Vehicle Specialist Inspector and Inspecting Organisation*

Heavy Vehicle Specialist Inspector's or Manufacturing Inspecting Organisation's Name *(PRINT IN CAPS)*

**WAYNE COOPER**

ID

**WC**

Vehicle Registration\*

VIN/Chassis Number

**7 A 9 E 3 1 0 1 0 E 1 0 2 3 2 9 2**

Component being certified:

Chassis Modification

Load Anchorage

Log Bolsters

Towing Connection

Brakes

SRT

PSV Stability

PSV Rollover

Swept Path

PBS

Certification Category

**HVEA**

Description of Work

**NEW DECK MANUFACTURED AND FITTED BY DOMETTS.**

**32mm BAR @ 105mm SPANS: 47 PER SIDE RATED @ 5000kg EACH.**

**12mm CHAIN PLATES: 23 PER SIDE RATED @ 6000kg EACH.**

Code/Standard/Rule Certified to

**NZS 5444**

Component Load Rating(s)

**PAYLOAD 25,000kg**

General Drawing Number(s)

**3095-13**

Supporting Documents

**MATRIX CALCULATIONS 4-LAS-020, 4-LAS-024, 4-LAS-031 & 4-LAS-051.**

Special Conditions\*

THIS CERTIFICATE IS A STATEMENT OF COMPLIANCE AT THE TIME OF CERTIFICATION ONLY AND DOES NOT OFFER OR IMPLY ANY GUARANTEE OR WARRANTY WITH RESPECT TO THE WORK CERTIFIED OR ANY OTHER ASPECT OF THIS VEHICLE. COMPONENT/VEHICLE IS TO BE RE-INSPECTED BY A LAND TRANSPORT NZ APPROVED HEAVY VEHICLE SPECIALIST CERTIFIER ON OR BEFORE THE CERTIFICATION EXPIRY DATE STATED. THIS CERTIFICATION IS NULL & VOID IF VEHICLE/COMPONENT IS SUBSEQUENTLY MODIFIED, ACCIDENT DAMAGED, OR RE-CERTIFIED.

Certification Expiry Date *(if applicable)*

**23-09-2024**

or

Hubodometer Reading *(whichever comes first)*

## Declaration

I the undersigned, declare that I am the Heavy Vehicle Specialist Inspector identified and I hold a current valid appointment. I certify that the above mentioned vehicle component's design, manufacture and installation, and this certification complies in all respects with the Land Transport Rule: Vehicle Standards Compliance 2002 and my Appointment. To the best of my knowledge the information contained in the Certificate is true and correct.

Designer's ID *(if different from inspector below)*

Inspector's Signature

Inspector's Name *(PRINT IN CAPS)*

ID Number

Date

**23-09-2014**

Number

**487253**

CoF Vehicle Inspector ID

CoF Vehicle Inspector Signature

Date

All fields excluding those marked with \* must be completed before this certificate can be accepted.